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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 900.00)

Complete if Known

| | |
|----------------------|-------------------------------------------|
| Application Number | 10/044,589 |
| Filing Date | January 11, 2004 |
| First Named Inventor | Soeren H. Thomsen |
| Examiner Name | James D. Ewart |
| Art Unit | 2683 |
| Attorney Docket No. | Technology Center 2600 29505/PF02187NA |

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METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order Other None

 Deposit Account:

Deposit Account Number **13-2855**
Deposit Account Name **MARSHALL, GERSTEIN & BORUN LLP**

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Description | Fee Paid |
|-----------------------------------|--------------|-------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) |
| 1051 | 130 | 2051 | 65 |
| 1052 | 50 | 2052 | 25 |
| 1053 | 130 | 1053 | 130 |
| 1812 | 2,520 | 1812 | 2,520 |
| 1804 | 920* | 1804 | 920* |
| 1805 | 1,840* | 1805 | 1,840* |
| 1251 | 110 | 2251 | 55 |
| 1252 | 430 | 2252 | 215 |
| 1253 | 980 | 2253 | 490 |
| 1254 | 1,530 | 2254 | 765 |
| 1255 | 2,080 | 2255 | 1,040 |
| 1401 | 340 | 2401 | 170 |
| 1402 | 340 | 2402 | 170 |
| 1403 | 300 | 2403 | 150 |
| 1451 | 1,510 | 1451 | 1,510 |
| 1452 | 110 | 2452 | 55 |
| 1453 | 1,370 | 2453 | 685 |
| 1501 | 1,370 | 2501 | 685 |
| 1502 | 490 | 2502 | 245 |
| 1503 | 660 | 2503 | 330 |
| 1460 | 130 | 1460 | 130 |
| 1807 | 50 | 1807 | 50 |
| 1806 | 180 | 1806 | 180 |
| 8021 | 40 | 8021 | 40 |
| 1809 | 790 | 2809 | 395 |
| 1810 | 790 | 2810 | 395 |
| 1801 | 790 | 2801 | 395 |
| 1802 | 900 | 1802 | 900 |
| Other fee (specify) | | | |
| *Reduced by Basic Filing Fee Paid | | SUBTOTAL (3) (\$) | 900.00 |

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Extra Claims | Fee from below | Fee Paid |
|--------------------|----------------|----------|
| Total Claims | ** = | |
| Independent Claims | ** = | |
| Multiple Dependent | | |

| Large Entity | Small Entity | Fee Description |
|------------------------------------------------------------|--------------|-----------------|
| Fee Code | Fee (\$) | Fee Code (\$) |
| 1202 | 18 | 2202 9 |
| 1201 | 88 | 2201 44 |
| 1203 | 300 | 2203 150 |
| 1204 | 88 | 2204 44 |
| 1205 | 18 | 2205 9 |
| ** Reissue claims in excess of 20 and over original patent | | |
| SUBTOTAL (2) (\$) | | 0.00 |

**or number previously paid, if greater; For Reissues, see above

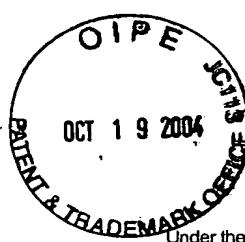
| SUBMITTED BY | | (Complete if applicable) | | |
|-------------------|------------------|--------------------------------------|--------|--------------------------|
| Name (Print/Type) | Anthony G. Sitko | Registration No. (Attorney/Agent) | 36,278 | Telephone (312) 474-6300 |
| Signature | | | Date | October 15, 2004 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 15, 2004

Signature:

(Anthony G. Sitko)



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|------------------------------------------|----|------------------------|-------------------|
| | | Application Number | 10/044,589 |
| | | Filing Date | January 11, 2002 |
| | | First Named Inventor | Soeren H. Thomsen |
| | | Art Unit | 2683 |
| | | Examiner Name | James B. Ewart |
| Total Number of Pages in This Submission | 12 | Attorney Docket Number | 29505/PF02187NA |

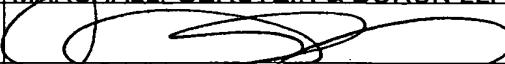
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Technology Center 2600

ENCLOSURES (Check all that apply)

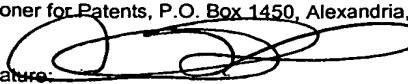
| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure: Request for Continued Examination Transmittal |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">Remarks</div> | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|-------------------------------------------------------------------------------------|----------|--------|
| Firm Name | MARSHALL, GERSTEIN & BORUN LLP | | |
| Signature |  | | |
| Printed name | Anthony G. Sitko | | |
| Date | October 15, 2004 | Reg. No. | 36,278 |

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